FORM D

Mail Proc

Washin

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Temporary FORM D

TICE OF SALE OF SECURITIES URSUANT TO REGULATION D, **SECTION 4(6), AND/OR** 101 NIFORM LIMITED OFFERING EXEMPTION

76	(1)
OMB AP	PROVAL
OMB NUMBER:	
xpires: 1	March 16, 2009
stimated ave	
	onse 16.00

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

	amendment and name has changed, and indicate	te change.)				
Viridian Fund, LP – Offering of Limited Filing Under (Check box(es) that apply):	□ Rule 504 □ Rule 505 □ Ru	ile 506 Section Roce ived Section				
	Amendment:	and seemon actived SEC				
Type of Fining.	A. BASIC IDENTIFICATION DATA					
1. Enter the information requested about th	e issuer					
Name of Issuer (check if this is an am	endment and name has changed, and indicate	change.)				
Viridian Fund, LP		Wash				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Num 09011047				
c/o Vermillion Asset Management, LLC,	267 Fifth Avenue, New York, NY, 10016	212-683-8816				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
Brief Description of Business: Investment	ts in securities					
Type of Business Organization		□ other (please specify):				
☐ corporation	☐ limited partnership, already formed	Received SEC				
□ business trust	☐ limited partnership, to be formed	SEC				
	_					
CN for Cana GENERAL INSTRUCTIONS Note: This is	n: (Enter two-letter U.S. Postal Service abbrevada; FN for other foreign jurisdiction) a special Temporary Form D (17 CFR 239.500T)) that is available to be filed instead or from D (17				
paper format on or after September 15, 2008 b using Form D (17 CFR 239.500) but, if it does requirements of § 230.503T. Federal: Who Must File: All issuers making a	ut before March 16, 2009. During that period, ar	CFR 239.500T) or an amendment to such a notice in a issuer also may file in paper format an initial notice (17 CFR 239.500) and otherwise comply with all the on under Regulation D or Section 4(6), 17 CFR				
230.501 et seq. Or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549. Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.						
Information Required: A new filing must con	tain all information requested. Amendments ne	ed only report the name of the issuer and offering, any ation previously supplied in Parts A and B. Part E need				
•		MAY 1 3 2009				
adopted ULOE and that have adopted this for where sales are to be, or have been made. If a	rm. Issuers relying on ULOE must file a separat state requires the payment of a fee as a precond ice shall be filed in the appropriate states in ac	for sales of securities in those state that have enotice which Bethers Administrator in each state lition to the claim for the exemption, a fee in the proper ecordance with state law. The Appendix to the notice				
Fallows to file making in the grown.		tederal exemption Conversely failure to file				
the appropriate federal notice will	I not result in a loss of an available	federal exemption. Conversely, failure to file state exemption unless such exemption is				

2. Enter the information requested for the follow		_		
 Each promoter of the issuer, if the issuer Each beneficial owner having the power the issuer; 			, 10% or more of	a class of equity securities of
 Each executive officer and director of co Each general and managing partner of partners 		orate general and managing	g general partners	of partnership issuers; and
Check Box(es)that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Investment Adviser
Full Name (Last name first, if individual) Vermillion Asset Management LLC		-		
Business or Residence Address (Number at 267 Fifth Avenue, New York, NY 10016	nd Street, City, State, Zip	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual) Viridian Partners, LLC				
Business or Residence Address (Number at 267 Fifth Avenue, New York, NY 10016	nd Street, City, State, Zip	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	Executive Officer of General Partner	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual) Nygaard, Christopher				
Business or Residence Address (Number at 267 Fifth Avenue, New York, NY 10016	nd Street, City, State, Zip	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual) Gilbert, Andrew				
Business or Residence Address (Number at 267 Fifth Avenue, New York, NY 10016	nd Street, City, State, Zip	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual) Zuech, Christopher			1000	
Business or Residence Address (Number at 267 Fifth Avenue, New York, NY 10016	nd Street, City, State, Zip	Code)		
Check Box(es)that Apply:	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual)	The second secon			
Business or Residence Address (Number a	nd Street, City, State, Zip	Code) The First Supplies the Supplies of Supplies the Sup		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, if individual)				
Business or Residence Address (Number as	nd Street, City, State, Zip	Code)		

A. BASIC IDENTIFICATION DATA

71 72 W. H. W.	COENDA-		eral selektiret	n'	INFORMAT	TION AROL	TOFFFRE	ic	Alleit or a significant and			
				ter S.J D.	INFURNIA	TON ABOU	TOFFERE	A The State of the		the committee show of the	Yes	No
1. Has the	issuer sold	, or does th	e issuer int	end to sen	d, to non-ac	credited in	vestors in t	his offering	g?			\boxtimes
			An	swer also i	n Appendi:	x, Column	2, if filing	under ULO	E.			
2. What is	the minim	um investn	ent that wi	Il be accep	ted from ar	y individu	al?				\$ <u>1,0</u>	<u>00,000*</u>
*Mini	mum is sul	bject to a r	eduction o	r increase	by the Ger	neral Part	ner in its d	iscretion, l	out not le	ss than \$100	,000	
												No
3. Does th	e offering j	oermit joint	t ownership	of a single	unit?						🛛	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
N/A	e (Last nam	ie first, if ir	iaiviauai)									
	or Residen	e Address	(Number	and Street	, City, State	e, Zip Code	:)					
			`									
Name of	Associated	Broker or l	Dealer									
			licited or Inte dual States)							□All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nam	e first, if in	ndividual)									
			21 1	1.0	G'4 G4-4	- 7'- C-1	->					
Business	or Residen	ce Address	(Number	and Street	, City, State	e, Zip Coae	2)					
Name of	Associated	Broker or	Dealer	.,,		, , , , , , , , ,						
Deates in it			licited or Inte dual States)							□All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)						•			
												_
Rusiness	or Residen	ce Address	(Number	and Street	. City, State	e, Zip Code	e)					

Name of Associated Broker or Dealer

* C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	**************************************
1. Enter the aggregate offing price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Amount	Amount Already Sold
Debt	\$ <u>0</u>	\$ <u>0</u>
Equity	\$ <u>0</u>	\$ <u>0</u>
□ Common □ Preferred		
Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
Partnership Interests	\$ <u>0</u>	\$ <u>0</u>
Other (Specify) Limited Partnership Interests	\$ <u>Unlimited</u>	\$ <u>48,915,000</u>
Total	\$ <u>Unlimited</u>	\$ <u>48,915,000</u>
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".		Aggregate
Accredited Investors	Number Investors 36	Dollar Amount of Purchases \$ 48,880,000
Non-accredited Investors	5	\$ 35,000
		\$ <u>N/A</u>
Total (for filings under Rule 504 only)	N/A	φ <u>1\/A</u>
Answer also in Appendix, Column 4, if filing under ULOE		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505	N/A	\$ <u>0</u>
Regulation A	N/A	\$ <u>0</u>
Rule 504	<u>N/A</u>	\$ <u>0</u>
Total	<u>N/A</u>	\$ <u>0</u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$ <u>0</u>
Printing and Engraving Costs		\$ <u>0</u>
Legal Fees		\$ <u>40,000</u>
Accounting Fees		\$ <u>0</u>
Engineering Fees		\$ <u>0</u>
Sales Commissions (specify finder's fees separately)		\$ <u>0</u>
Other Expenses (identify):		\$ <u>0</u>
Total		\$ 40,000

C. OFFERING PRICE, NUMBER OF INVI	ESTORS, EXPENSES A	VD U	SE OF PROC	EEDS		
b. Enter the difference between the aggregate offering price Question 1 and the total expenses furnished in response to Part C the "adjusted gross proceeds to the issuer"	- Question 4.a. this differ	ence i	s		\$ <u>Unlin</u>	nited
Indicate below the amount of the adjusted gross proceeds to the is for each of the purposes shown. If the amount for any purpose is and check the box to the left of the estimate. The total of the adjusted gross proceeds to the issuer set froth in response to Part C	s not known, furnish an es payments listed must equ	stimat	е			
			Payments T Officers, Directors, Affiliates	& _		ayments To Others
Salaries and fees			\$ <u>0</u>		· -	
Purchase of real estate			\$ <u>0</u>	_ [
Purchase, rental or leasing and installation of machinery and	• •		\$ <u>0</u>	c		
Construction or leasing of plant buildings and facilities			\$ <u>0</u>	□	1 \$ <u>.0</u>	
Acquisition of other businesses (including the value of securi offering that may be used in exchange for the assets or securi issuer pursuant to a merger)	ties of another		\$ <u>0</u>	[] \$ <u>0</u>	
Repayment on indebtedness			\$ <u>0</u>	_ ⊏]	
Working capital			\$ <u>0</u>	[] \$ <u>0</u>	
Other (specify): Investment in Securities			\$ <u>0</u>	_ [] \$ <u>U</u>	nlimited
Column Totals			\$ <u>0</u>	[] \$ <u>U</u>	nlimited
Total Payments Listed (column totals added)				\$ <u>Unli</u>	mited	
D. PEDERA	AL SIGNATURE					7.8 (A
the issuer has duly caused this notice to be signed by the undersignature constitutes an undertaking by the issuer to furnite information furnished by the issuer to any non-accredited investors.	ish to the U.S. Securities	Com	nission, upon	s filed writter	under R request	ule 505, the of its staff,
Issuer (Print or Type) Viridian Fund, LP	Signature	4	7	Date	12/0	59
Name of Signer (Print or Type) Christopher Zuech	Title of Signer (Print or Authorized Signatory of Partner	Type)	idian Partner	s, LLC	the Ge	neral
A	TTENTION	naly	violations ((See 1	8115	2 1001)

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E, ST	ATE SIGNATURE		
1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) prof such rule?	· · · · · · · · · · · · · · · · · · ·	_	es No I 🛛
2. The undersigned issuer hereby undertakes to furnish to any s D (17 CFR 239.500) at such times as required by state law.	tate administrator of any state in which this	s notice is filed, a notice	e on Form
3. The undersigned issuer hereby undertakes to furnish to the st to offerees.	tate administrators, upon written request, in	nformation furnished by	the issuer
4. The undersigned issuer represents that the issuer is familiar valued Offering Exemption (ULOE) of the state in which the exemption has the burden of establishing that these conditions that these conditions is the state of the exemption of the exemption has the burden of establishing that these conditions is the exemption of the exemption has the burden of establishing that these conditions is the exemption of the exemption o	is notice is filed and understands that the i		
The issuer has read this notification and knows the contents tundersigned duly authorized person.	o be true and has duly caused this notice	e to be signed on its be	chalf by the
Issuer (Print or Type) Viridian Fund, LP	Signature	Date 3/12/	09

Partner

Title of Signer (Print or Type)

Authorized Signatory of Viridian Partners, LLC, the General

Instruction:

Name of Signer (Print or Type)

Christopher Zuech

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1. <u>8</u> . 5 7 £	WERE STATES	4455		APPEN	DIX				5			
1	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	fering (if: State Type of investor and exp		regate offering ffered in State Type of t C-Item 1) amount p		4 Type of investor and amount purchased in State				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes N/A	No N/A			
AL				,				IVA	IVA			
AK												
AZ												
AR												
CA		X	Limited Partnership Interests	1	\$2,000,000	0	0		X			
CO	\ 2.		Anteress									
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Type of security and aggregate officing to investors with the process of the investors with the processor	15 5 5			management of the second secon	APPEN	DIX				1155
State Yes No Accredited Investors Amount Investors Non-Accredited Investors Amount Investors Amount Property of The Property of	1	Intend to non-ac investors	to sell ceredited in State	and aggregate offering price offered in State		amount pure	chased in State C-Item 2)		Disqual under Sta (if yes explan waiver	ification ate ULOE , attach ation of granted)
MT NE	State	Yes	No		Accredited	Amount	Non-Accredited	Amount		
NY	MT								14/21	1,772
NH NJ	NE									
NM	NV									
NM	NH	.,								
NY	NJ									
NC	NM									
ND	NY									
OH OH OK OK OR	NC									
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OR	ОН									
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VA Image: Control of the c	UT									
WA Image: Control of the c	VT							-		
WV Image: Control of the c	VA									
WI Image: Control of the c	WA									
WY WY	WV									
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PR PR	WY									
	PR				1					